**** THIS PERMIT MUST BE FILED WITH THE HARBOMASTER EVERY YEAR ****

Please return this application with your excise tax payment or mail to:



Quincy Harbormaster

Houghs Neck Maritime Center

137 Bayview Avenue, Quincy, Massachusetts 02169

Phone: (617) 745-5896 E-mail: <u>quincypolicemarineunit@quincyma.gov</u>

			Application For Quincy	/ Harbor
	oat in Quincy during the s			Office Use Only
Did you own your boat on July 1, 2015: Yes No Renewal				
				Permit No.
Name of Yacht Club	or Marina (if none, type in	n PRIVATE and indicate	Latitude / Longitude below)	Mooring No.
]- N		w 🗆 🗆 🗆	iviooring ivo.
Latitude (example: 042.)	16.00) N Longitud	le (example: 070.52.00) W	Marina Slip No.	
Requested Mooring	Area: ☐ Trailer	☐ Orchard Bea	ch ☐ Adams Shore ☐ Town River	☐ Rock Island Cove
	☐ Manet Be	ach	each □ Edgewater □ Private	
A Section A	Owner's Section —			
Owner's First Name		M.I. Owner's	Last Name	
Address (Street Name)				
City/Town		State Zip code		
		State Zip code		1-000-000
Home Phone			Cell Phone/E	mergency Phone
Essell Address				
Email Address				
Vessel Name				
Make		Model	tor □Sail □Other	Hull Color
Boat Year	Draft ←in feet→ Length Over A Please Round Off	Boat Type: ☐Mo Vessel Use: ☐Ple	tor □Sail □Other asure □Commercial Fishing □Com	mercial Government Exempt
B Section B	State —			
Registration No:	00-0000		Expiration Date:	
C Section C	Federal			
Documentation No. (If D	Documented)	Name of Boat (If Docum	nented) Hai	ling Port on Boat (If Documented)
Country Documented		Address on Certificate		
D Section D	Moored Vessels —			
Type of Mooring:	Mushroom	☐ Granite Block	☐ Cement Block ☐ He	elix
Size of Mooring/Bloo	ck/Mushroom:	lbs	Chain Size & Length:	
	FULL PAYMENT	OF BOAT EXCISE TA	X MUST BE MADE YEARLY IN O	RDER
			VOID ANY PENALTY OR VIOLAT	
		e examined this applicat	ion, and to the best of my knowledge a	and belief, the information is true,
correct, and complet	ie.			

Applicant's Name or Signature